FORM D

AUG 0 7 2007

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1409631

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00

SEC USE ONLY									
Prefix		Serial							
DA	TE RECEIV	ED							
:		i							

Name of Offering (check if this is an amendment and name has changed, and indicate cl	nange.)
Series A 2007, Rule 504 Offering, Jewelisa Holdings, Inc.	
Filing Under (Check box(es) that apply):	Section 4(6) ULOE
Type of Filing:	
A. BASIC IDENTIFICATION DA	TA 07074565
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate chan	gc.)
Jewelisa Holdings, Inc.	
Address of Executive Offices (Number and Street, City, State, 2	Zip Code) Telephone Number (Including Area Code)
3226 West Benders Landing Blvd, Spring, Texas 77386-1890 USA	(832) 225-1372
Address of Principal Business Operations (Number and Street, City, State,	Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)	(000) 447 0055
7527 Adove Road, Montgomery, Texas 77316	(936) 447-2955
Brief Description of Business	
Sand and Gravel Pit Mining	
	PHOCESCED
Type of Business Organization	-0505D
	other (please specify):
business trust limited partnership, to be formed	other (please specify): AUG 1 5 2007
Month Year	_ to #MUMSOA
Actual or Estimated Date of Incorporation or Organization: 01 04 Actual	Estimated FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviati CN for Canada; FN for other foreign jurisdic	
Civitor Canada, 114 for Other Toreign Jurisdie	tion) CN

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A RASIC IDE	NTII	FICATION DATA				
2. Enter the information requ	ested for the foll	lowing		14111	TEATION DATA		· · ·		
Each promoter of the				thin t	the nast five years:				
·			-		•	of 10°	% or more o	if a clas	s of equity securities of the issuer
Each executive offic	· .		• '		-	-			• •
Each general and ma		•		orpo	rate general and man	ugg	partners of	partite	isinp issueis, and
• Each general and ma	maging partner of	parti	icisinp issucts.						
Check Box(es) that Apply:	Promoter	J	Beneficial Owner	V	Executive Officer	1	Director		General and/or Managing Partner
Full Name (Last name first, if Hunt, Jewel	individual)		 	• • •	·				
Business or Residence Address	(Number and	Street	City State Zin Co	de)			· · ·	· · · ·	
7527 Adove Road, Montgo	-			,					
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	Z	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)						<u></u>		·
Hunt, Lisa A.	moreroual)								
Business or Residence Address	(Number and	Strant	City State 7in Co.	de)					
7527 Adove Road, Montgo	•			uc)					
Check Box(es) that Apply:	Promoter		Beneficial Owner	_	Executive Officer	$\overline{}$	Director		General and/or
Check Box(es) that Apply.		ш	Beneficial Owner	ш	Executive Officer	ш	Director	L	Managing Partner
Full Name (Last name first, if	individual)								
run Name (Last name mst, m	arutviduai)								
Business or Residence Address	(Number and	Straat	, City, State, Zip Co	40)	··-				
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Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director	_	General and/or
Check Box(es) that Apply.		Ш	Belleticiai Owliei	Ш	Executive Officer	Ш	Director	Ш	Managing Partner
Full Name (Last name first, if	individual)								
run Name (Last name mst, m	iliutviuuai)								
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Check Box(es) that Apply:	Promoter	Ц	Beneficial Owner	П	Executive Officer	Ш	Director		Managing Partner
Full Name (Last name first, if	individual)			-					
run Name (Last name titst, it	murviuuai)								
Business or Residence Address	(Number and	Ctanat	, City, State, Zip Co	i		-			
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Check Box(es) that Apply:	Promoter	Ц	Beneficial Owner	Ш	Executive Officer	Ц	Director	Ļ	General and/or Managing Partner
Putt Man (7 at 16 at 16)	11.11.15								
Full Name (Last name first, if	individuar)								
Business or Residence Address	(Number and)	C++	City State 7:- Co	4					· · · · · · · · · · · · · · · · · · ·
Business of Residence Address	(Number and	Street	, City, State, Zip Co	ae)					
Charle Day(as) that Appley	December.		D		F	_	D'		<u> </u>
Check Box(es) that Apply:	Promoter	Ц	Beneficial Owner	Ш	Executive Officer		Director	Ш	General and/or Managing Partner
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Full Name (Last name first, if i	matviauai)								
Duringer or Decident Add	Olumba 11	C+	Circ State 2: C						
Business or Residence Address	(inumber and)	SUFECT	, City, State, Zip Co	ue)					

	•			В. Л	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has the	issuer solo	d, or does t	he issuer i	ntend to se	ll to non-a	ccredited i	investors in	this offer	ing?		Yes	No X
		- ,			Appendix				•			
2. What is	s the minim	ıum investn					_				s 100	0.00
	2. What is the minimum investment that will be accepted from any individual?											No
commis If a pers or state	ssion or sim son to be lis	ilar remune sted is an ass ame of the b	cration for s sociated pe proker or de	solicitation erson or age ealer. If me	of purchase ent of a brol ore than five	ers in conn- ker or deale e (5) persor	ection with r registere ns to be list	sales of sed d with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state ons of such		
Full Name (Not Applica		first, if ind	ividual)									
Business or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Lip Code)						•
Name of As		l D-	-1	-								<u>÷</u>
Name of As	sociated Di	okei oi De	aici									
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	s" or check	individual	States)		•••••			***************************************	•	☐ Ai	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbf{w}}\mathbf{v}$	<u>WI</u>	WY	PR
	Full Name (Last name first, if individual) Not Applicable											
	Business or Residence Address (Number and Street, City, State, Zip Code)											
New Charles ID II D. I.												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check	"All States	or check	individual	States)		••••••				•••••		l States
AL	AK	ĀZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪĎ
IL	IN	IA.	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	[WV]	WI	WY	PR
Full Name (first, if ind	ividual)		<u> </u>					····		
Business or		Address (1	Number an	d Street, C	ity, State, 2	Zip Code)	•			,	*	
Name of As	sociated Br	oker or Da	alar	.								
Name of As	sociated Bi	okei di De	aici									
States in WI	hich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	" or check	individual	States)		•••••				•••••	☐ All	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT)	NE ISC	NV SD	NH	NJ	NM [TT]	NY VT	NC VA	ND WA	OH WV	OK	OR WV	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s 0.00
		\$ 1,000,000.00	s 100.00
	✓ Common Preferred	*	
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify)		\$ 0.00
	Total	s 1,000,000.00	\$ 100.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	*
2.	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 100.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)		\$_100.00
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	0	\$_0.00
	Regulation A	0	\$_0.00
	Rule 504	0	\$_0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	.	\$1,500.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		\$_1,500.00
	Accounting Fees		\$_1,500.00
	Engineering Fees	_	\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify)		\$_1,500.00
	Total	7 1	\$ 6,000.00

	C. OFFERING PRICE, NUMBI	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C — Q proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5 _	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of t proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
	•		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[§ 331,334.00	S_0.00
	Purchase of real estate	[\$_0.00	\$_0.00
	Purchase, rental or leasing and installation of mach and equipment	inery [\$ <u>0.00</u>	Z \$ 331,333.00
	Construction or leasing of plant buildings and facili			s 0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another]\$_0.00	s0.00
	Repayment of indebtedness			S 0.00
	Working capital		\$ 0.00	✓ \$ 331,333.00
	Other (specify):		s_0.00	s 0.00
		[<u></u>	so.oo
	Column Totals			\$ 662,666.00
	Total Payments Listed (column totals added)		☑ \$ <u>99</u>	4,000.00
		D. FEDERAL SIGNATURE		-
ig	e issuer has duly caused this notice to be signed by the u nature constitutes an undertaking by the issuer to furni information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis-	sion, upon writter	
SS	uer (Print or Type)	Rignature I.)ate	
Je	welisa Holdings, Inc.	hand (d)	20 July 2007	
۱a	me of Signer (Print or Type)	Title of Signer (Print or Type)		
ev	vel Hunt	Chairman/CEO		

<i></i>	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit D (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.		
	ier has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalthorized person.	If by the	undersigned
ssuer (Print or Type) Signature Date		
ewelisa	a Holdings, Inc. 20 July 2007		

Title (Print or 1)

Chairman/CEO

Instruction:

Name (Print or Type)

Jewel Hunt

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes State No Investors Amount Investors Amount Yes No ALAK ΑZ AR CA \mathbf{CO} CTDE DC \$333,334.00 FL GAШ ID IL ΙN IA KS KY LA ME MD MA ΜI \$333,333.00 MN X MS

2 3 4 1 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell explanation of to non-accredited offering price Type of investor and waiver granted) investors in State offered in state amount purchased in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Amount Investors Amount Yes No State MO MT NE NVNH NJ NM NY NC ND OH OK OR PΑ RI SCSD TN TX\$333,334.00 UT VT VAWA $\mathbf{W}\mathbf{V}$ $\mathbf{W}\mathbf{I}$

APPENDIX

	APPENDIX											
1		2	3		4							
	to non-a	I to sell accredited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

